PRIORITISED ANNUAL HEPATITIS C TESTING DRIVES IN DRUG RECOVERY SERVICES SHOW ACCEPTABILITY AND EFFECTIVENESS OF TESTING

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Background:
As part of the implementation of the Scottish Hepatitis C Action Plan, Hepatitis C (HCV) testing was embedded as an intervention in Glasgow Alcohol and Drug Recovery Services (GADRS). Staff were trained and Dry Blood Spot (DBS) tests were made widely available. Despite these measures, uptake remained low.

In 2015, an audit in South West Care and Treatment (SWCAT) team opiate substitution therapy (OST) clinics found only 15% of patients had been tested for HCV within the previous 12 months

Description of model of care/intervention:
A new approach was implemented with the aim of increasing annual testing in an effective and sustainable way.

Awareness campaign
- Poster campaign in clinic premises
- Integrated SWCAT staff team briefed (admin, social care, nursing, medical)

Testing
- Prioritised annual testing month identified
- Targeted approach by staff promoting tests and raising awareness
- Opt out testing adopted
- Instant access to DBS testing for all patients
- Consistent medical support to staff and patients

Effectiveness:
2015 – 148 offered test, 146 (98.6%) accepted
2016 – 172 offered test, 172 (100%) accepted
2017 – 172 offered test, 169 (98.2%) accepted

Over the three years, a total of 303 patients were HCV tested. Of 172 tested in 2017, 99 (57.5%) attended SWCAT during either previous testing period, with 98 (99%) accepting retest in 2017. Of 172 tested in 2016, 125 (73.8%) have had an additional test during either the 2015 or 2017 testing periods

95 (31.4%) patients were diagnosed with active HCV infection.

Conclusion and next steps:
Annual opt out HCV testing offered in this way is both highly acceptable and effective in the OST clinic setting. Annual testing at SWCAT will continue with aim of identifying new infections and importantly monitor reinfection rate for treated patients post SVR. The approach will be rolled out to all community teams.

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